

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

APPLICANT'S NO. 09773247

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
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49							99						
50							100						
TOTAL D.	2		2				TOTAL IND.						
TOTAL DEP.	8		7				TOTAL DEP.						
TOTAL CLAIMS	10		9				TOTAL CLAIMS						

0-1360 (2-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT of COMMERCE
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